

Image# 13964579739

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**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Republican Party of Iowa

ADDRESS (number and street) ▼

621 E. Ninth Street

☐ Check if different than previously reported. (ACC)

Des Moines

IA

50309

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00014498

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☒ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
05 01 2012

through

M M M / D D D / Y Y Y Y Y Y  
05 31 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer John Kabitzke

Signature of Treasurer

John Kabitzke

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
08 30 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Republican Party of Iowa

Report Covering the Period:

From:

 M M / D D / Y Y Y Y  
 05 / 01 / 2012

To:

 M M / D D / Y Y Y Y  
 05 / 31 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2012		689347.75
(b) Cash on Hand at Beginning of Reporting Period.....	541369.18	
(c) Total Receipts (from Line 19) .....	48571.07	246380.64
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	589940.25	935728.39
7. Total Disbursements (from Line 31) .....	146257.03	492045.17
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	443683.22	443683.22
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	44661.59	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE

## of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Republican Party of Iowa

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 05 / 01 / 2012

To:

 M M / D D / Y Y Y Y Y  
 05 / 31 / 2012
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

4666.32

78620.60

(ii) Unitemized .....

15045.24

62458.18

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

19711.56

141078.78

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

2500.00

4925.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

22211.56

146003.78

## 12. Transfers From Affiliated/Other

Party Committees.....

26288.89

26288.89

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

70.62

4615.79

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

69472.18

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

69472.18

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

48571.07

246380.64

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

48571.07

176908.46

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	6541.02	52755.33
(ii) Non-Federal Share.....	16819.74	135656.54
(b) Other Federal Operating Expenditures .....	38742.27	204679.30
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	62103.03	393091.17
22. Transfers to Affiliated/Other Party Committees.....	2000.00	5000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	10000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	82154.00	83954.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	82154.00	83954.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	146257.03	492045.17
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	129437.29	356388.63

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	22211.56	146003.78
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	22211.56	146003.78
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	45283.29	257434.63
37. Offsets to Operating Expenditures (from Line 15, page 3).....	70.62	4615.79
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	45212.67	252818.84

: 97 'A -G7 9 @ 5 B9 CI G'H9 LH'F9 @ 5 H98 'HC '5 'F9 DCFH ZG7 <98 I @ 'CF 'H9 A -N5 H-CB

Form/Schedule: F3XA

Transaction ID :

All expenditures listed on Schedule B for line 30b during this period are generic, and not made on behalf of any federal election or federal candidate/committee. During this reporting period, payroll, payroll taxes and fringe benefits for any committee employee who spent 25% or more of their time on activities related to a Federal election are being reported as Federal Election Activity and show on Schedule B for line 30b. All salaries, wages and/or fringe benefits reported on Schedule H4 are for employees who spent less than 25% of their time on federal election activity or in connection with a Federal election. The committee hereby incorporates by reference Form 99 Miscellaneous Report, June 20, 2009, outlining its policies with regard to payments received by candidate committees for goods and services provided. The Republican Party of Iowa owns and operates its own building and land at its headquarters in Des Moines, Iowa. This committee does not recognize registered lobbyists or registrant committees for purposes of aggregate contributions. The Republican Party of Iowa follows a best efforts policy/procedure that begins with a clean and conspicuous request from donors for their full name, mailing address, occupation, and name of employer at the initial solicitation for a contribution, informing the contributor of the requirements of federal law for the reporting of such information, as required by under 11 CFR 104.7. Upon receipt of a contribution, collected donor information, as reported by the donor, is captured into our contributor database for purposes of reporting on the next FEC disclosure report. All contributors who have crossed the \$200 cumulative threshold and have not provided sufficient information are sent correspondence requesting the missing information (that does not include a solicitation of contribution), including a postage-paid return envelope. This is completed on a twice monthly basis. If information is still missing at the time of a reporting cutoff, a phone contact is made. A record of the correspondence is documented and retained for verification. Every effort is made to never have missing information on each disclosure report before filing; however, when information is received following a filing, amendments of the original report or memo entries on subsequent reports are submitted.

Form/Schedule:

Transaction ID:

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Republican Party of Iowa**

Full Name (Last, First, Middle Initial)

## **A. Stanley Barber**

Mailing Address 1 Oaknoll Ct Unit 458

City  
Iowa City

State  
IA

Zip Code  
52246-5250

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 16 / 2012

**Transaction ID : 20611.C367262**

Amount of Each Receipt this Period

250.00

Receipt

Full Name (Last, First, Middle Initial)

## **B. John Bovenmyer**

Mailing Address 4600 Crow Creek Court

City  
Bettendorf

State  
IA

Zip Code  
52722

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Bovenmyer Dermatology PC

Occupation

Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.20

Date of Receipt

05 / 01 / 2012

**Transaction ID : 20514.C367036**

Amount of Each Receipt this Period

201.20

Receipt

Full Name (Last, First, Middle Initial)

## **C. Peggy Eason**

Mailing Address 819 220th St

City  
Scranton

State  
IA

Zip Code  
51462-7506

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Farmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

05 / 21 / 2012

**Transaction ID : 20611.C367426**

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

551.20

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

**Republican Party of Iowa**

Full Name (Last, First, Middle Initial)

## **A. Joann Garrelts**

Mailing Address 1613 18th Ave W

City

Spencer

State

IA

Zip Code

51301-2736

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Farmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

05 / 29 / 2012

**Transaction ID : 20615.C367541**

Amount of Each Receipt this Period

105.00

Receipt

Full Name (Last, First, Middle Initial)

## **B. Lowell Grunwald**

Mailing Address 507 W. Orchard Avenue

City

Indianola

State

IA

Zip Code

50125-1155

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

05 / 18 / 2012

**Transaction ID : 20611.C367114**

Amount of Each Receipt this Period

65.00

Receipt

Full Name (Last, First, Middle Initial)

## **C. Charles Heyn**

Mailing Address 104 Ridgeview Cir

City

Williamsburg

State

IA

Zip Code

52361-5400

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.12

Date of Receipt

05 / 17 / 2012

**Transaction ID : 20611.C367430**

Amount of Each Receipt this Period

20.12

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

190.12

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

**Republican Party of Iowa**

Full Name (Last, First, Middle Initial)

**A. John Holtze**

Mailing Address 5300 Woodland Ave

City

Des Moines

State

IA

Zip Code

50312-1946

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Iowa Clinic

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

05 / 16 / 2012

**Transaction ID : 20611.C367292**

Amount of Each Receipt this Period

200.00

Receipt

Full Name (Last, First, Middle Initial)

**B. Kenneth Keith**

Mailing Address 3305 142nd Ave

City

Ottumwa

State

IA

Zip Code

52501-8144

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Information Requested

Occupation

Attorney At Law

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

05 / 17 / 2012

**Transaction ID : 20611.C367333**

Amount of Each Receipt this Period

100.00

Receipt

Full Name (Last, First, Middle Initial)

**C. Joseph Knudson**

Mailing Address 3255 Cheyenne Boulevard

City

Sioux City

State

IA

Zip Code

51104-1835

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

05 / 22 / 2012

**Transaction ID : 20611.C367444**

Amount of Each Receipt this Period

200.00

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Republican Party of Iowa**

Full Name (Last, First, Middle Initial)

**A. Sue Lind**

Mailing Address 27 Lakeview Dr NE

City  
Iowa City

State  
IA

Zip Code  
52240-9103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.20

Date of Receipt

05 / 14 / 2012

**Transaction ID : 20516.C367093**

Amount of Each Receipt this Period

100.00

Receipt

Full Name (Last, First, Middle Initial)

**B. William Moss**

Mailing Address PO Box 285  
600 1st Ave

City  
Floyd

State  
IA

Zip Code  
50435-0285

FEC ID number of contributing  
federal political committee.

C

Name of Employer

n/a

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

05 / 17 / 2012

**Transaction ID : 20611.C367341**

Amount of Each Receipt this Period

100.00

Receipt

Full Name (Last, First, Middle Initial)

**C. Ronald Rickman**

Mailing Address 4208 E 58th St

City  
Davenport

State  
IA

Zip Code  
52807-3930

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 21 / 2012

**Transaction ID : 20611.C367413**

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

**Republican Party of Iowa**

Full Name (Last, First, Middle Initial)

## **A. Louis Rodgers**

Mailing Address 13138 Cedar Crest Ln

City State Zip Code  
Clive IA 50325-8751

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Surgery P.C.

Surgeon

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 25 / 2012

**Transaction ID : 20611.C367159**

Amount of Each Receipt this Period

200.00

Receipt

Full Name (Last, First, Middle Initial)

## **B. John Shenk, Jr.**

Mailing Address 1730 Harmony Court

City State Zip Code  
Bettendorf IA 52722

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 21 / 2012

**Transaction ID : 20611.C367420**

Amount of Each Receipt this Period

100.00

Receipt

Full Name (Last, First, Middle Initial)

## **C. Mary Sukup**

Mailing Address 1379 Beeds Lake Dr

City State Zip Code  
Hampton IA 50441-7437

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

None

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 21 / 2012

**Transaction ID : 20611.C367391**

Amount of Each Receipt this Period

250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

550.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 12 OF 63  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Republican Party of Iowa**

Full Name (Last, First, Middle Initial)

**A. Harlan VanderGriend**

Mailing Address 1341 Kahler Ct

City

Sheldon

State

IA

Zip Code

51201-1839

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Optometrist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

05 / 21 / 2012

**Transaction ID : 20611.C367434**

Amount of Each Receipt this Period

200.00

Receipt

Full Name (Last, First, Middle Initial)

**B. Ramona Esbeck**

Mailing Address 1801 20th St Apt B13

City

Ames

State

IA

Zip Code

50010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

200.00

Date of Receipt

05 / 16 / 2012

**Transaction ID : 20611.C367127**

Amount of Each Receipt this Period

200.00

Receipt

Full Name (Last, First, Middle Initial)

**C. Pauline Kelsay**

Mailing Address 2604 Sunrise Ln

City

Burlington

State

IA

Zip Code

52601

FEC ID number of contributing  
federal political committee.

C

Name of Employer

n/a

Occupation

Pharmacist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

200.00

Date of Receipt

05 / 16 / 2012

**Transaction ID : 20611.C367285**

Amount of Each Receipt this Period

200.00

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ►

600.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**Republican Party of Iowa**

Full Name (Last, First, Middle Initial)

## **A. Steven Korreck**

Mailing Address 19275 252nd Ave.

City  
Bettendorf

State  
IA

Zip Code  
52722-7350

FEC ID number of contributing  
federal political committee.

C

Name of Employer

John Deere

Occupation

General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 21 / 2012

**Transaction ID : 20611.C367415**

Amount of Each Receipt this Period

150.00

Receipt

Full Name (Last, First, Middle Initial)

## **B. Lois Wunschel**

Mailing Address 2205 Forest St

City  
Carroll

State  
IA

Zip Code  
51401-3660

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 17 / 2012

**Transaction ID : 20611.C367365**

Amount of Each Receipt this Period

150.00

Receipt

Full Name (Last, First, Middle Initial)

## **C. Guy VanderLinden**

Mailing Address 1610 Carbonado Rd

City  
Oskaloosa

State  
IA

Zip Code  
52577-2418

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State Legislature

Occupation

House Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

05 / 07 / 2012

**Transaction ID : 20514.C367072**

Amount of Each Receipt this Period

400.00

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

700.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Republican Party of Iowa**

Full Name (Last, First, Middle Initial)

**A. John Archer, Jr.**

Mailing Address 3195 Westminster Rd

City  
Bettendorf

State  
IA

Zip Code  
52722-4792

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JOHN DEERE CO

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

05 / 07 / 2012

**Transaction ID : 20514.C367064**

Amount of Each Receipt this Period

225.00

Receipt

Full Name (Last, First, Middle Initial)

**B. Michael Carroll**

Mailing Address 1525 NW 124th St

City  
Clive

State  
IA

Zip Code  
50325-8135

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State of Iowa

Occupation

Director of DAS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

05 / 22 / 2012

**Transaction ID : 20611.C367447**

Amount of Each Receipt this Period

200.00

Receipt

Full Name (Last, First, Middle Initial)

**C. Judd Saul**

Mailing Address 1801 Donald Drive

City  
Cedar Falls

State  
IA

Zip Code  
50613

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Robert Morris Group

Occupation

Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

05 / 02 / 2012

**Transaction ID : 20514.C367011**

Amount of Each Receipt this Period

250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

675.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Republican Party of Iowa**

Full Name (Last, First, Middle Initial)

## **A. Robert Quast**

Mailing Address 50 Birchwood Drive

City State Zip Code  
Blue Grass IA 52726

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Thunderstruck Entertainment, L

Occupation

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 01 / 2012

**Transaction ID : 20514.C367050**

Amount of Each Receipt this Period

225.00

Receipt

Full Name (Last, First, Middle Initial)

## **B. Robert Quast**

Mailing Address 50 Birchwood Drive

City State Zip Code  
Blue Grass IA 52726

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Thunderstruck Entertainment, L

Occupation

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 07 / 2012

**Transaction ID : 20514.C367063**

Amount of Each Receipt this Period

75.00

Receipt

Full Name (Last, First, Middle Initial)

## **C. Will Driscoll**

Mailing Address 1770 92nd Street #3208

City State Zip Code  
West Des Moines IA 50266

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 03 / 2012

**Transaction ID : 20514.C367052**

Amount of Each Receipt this Period

300.00

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

600.00

4666.32

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Republican Party of Iowa**

Full Name (Last, First, Middle Initial)

**A. Ron Paul for President**

Mailing Address 845 W. Plantation Drive

City State Zip Code  
Clute TX 77531

FEC ID number of contributing  
federal political committee.

**C** C00495820

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**05 / 01 / 2012**

**Transaction ID : 20514.C367038**

Amount of Each Receipt this Period

2500.00

Receipt

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

**/ /**

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

**/ /**

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2500.00

2500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Republican Party of Iowa**

Full Name (Last, First, Middle Initial)

## **A. Republican National Committee**

Mailing Address 310 First Street SE

City State Zip Code  
 Washington DC 20003-

FEC ID number of contributing  
federal political committee.

**C** C00003418

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8500.00

Date of Receipt

**05 / 02 / 2012**

**Transaction ID : 20615.C367652**

Amount of Each Receipt this Period

8500.00

Transfers From Affil./Auth.

Full Name (Last, First, Middle Initial)

## **B. The Iowa Congressional Majority Fund**

Mailing Address 228 S. Washington Street  
 Suite 115

City State Zip Code  
 Alexandria VA 22314-

FEC ID number of contributing  
federal political committee.

**C** C00503300

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

17788.89

Date of Receipt

**05 / 14 / 2012**

**Transaction ID : 20615.C367653**

Amount of Each Receipt this Period

17788.89

Transfers From Affil./Auth.

Full Name (Last, First, Middle Initial)

## **C. Political Action Committee of the AAOS**

Mailing Address 317 Massachusetts Ave.

City State Zip Code  
 Washington DC 20002-

FEC ID number of contributing  
federal political committee.

**C** C00343137

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**05 / 14 / 2012**

**Transaction ID : 20619.C367655**

Amount of Each Receipt this Period

2500.00

Transfer Memo

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional)..... ►

26288.89

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Republican Party of Iowa**

Full Name (Last, First, Middle Initial)

## **A. The Freedom Project**

Mailing Address 320 First St SE

City  
Washington

State Zip Code  
DC 20003-4399

FEC ID number of contributing  
federal political committee.

**C** C00305805

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**05 / 14 / 2012**

**Transaction ID : 20619.C367664**

Amount of Each Receipt this Period

5000.00

Transfer Memo

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

## **B. Swisher PAC**

Mailing Address 459 E. 16th Street

City  
Jacksonville

State Zip Code  
FL 32206-

FEC ID number of contributing  
federal political committee.

**C** C00312785

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

**05 / 14 / 2012**

**Transaction ID : 20619.C367663**

Amount of Each Receipt this Period

1250.00

Transfer Memo

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

## **C. National Emergency Medicine PAC**

Mailing Address PO Box 619911

City  
Dallas

State Zip Code  
TX 75261-

FEC ID number of contributing  
federal political committee.

**C** C00140061

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05 / 14 / 2012**

**Transaction ID : 20619.C367665**

Amount of Each Receipt this Period

500.00

Transfer Memo

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Republican Party of Iowa**

Full Name (Last, First, Middle Initial)

## **A. NRA Political Victory Fund PAC**

Mailing Address 11250 Waples Mill Rd.

City State Zip Code  
 Fairfax VA 22030-

FEC ID number of contributing  
federal political committee.

**C** C00053553

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4950.00

Date of Receipt

**05 / 14 / 2012**

**Transaction ID : 20619.C367666**

Amount of Each Receipt this Period

4950.00

Transfer Memo

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

## **B. California Dairies Federal PAC**

Mailing Address 475 S. Tegner Rd.

City State Zip Code  
 Turlock CA 95380-

FEC ID number of contributing  
federal political committee.

**C** C00349746

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**05 / 14 / 2012**

**Transaction ID : 20619.C367667**

Amount of Each Receipt this Period

2500.00

Transfer Memo

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

## **C. Citizens United Victory Fund PAC**

Mailing Address 1006 Pennsylvania Ave

City State Zip Code  
 Washington DC 20003-

FEC ID number of contributing  
federal political committee.

**C** C00295527

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**05 / 14 / 2012**

**Transaction ID : 20619.C367668**

Amount of Each Receipt this Period

2500.00

Transfer Memo

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Republican Party of Iowa**

Full Name (Last, First, Middle Initial)

## **A. Federal Express PAC**

Mailing Address 942 S. Shady Grove Rd.

City

Memphis

State

TN

Zip Code

38120-

FEC ID number of contributing  
federal political committee.

C

C00068692

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 14 / 2012

**Transaction ID : 20619.C367669**

Amount of Each Receipt this Period

500.00

Transfer Memo

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

26288.89



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Iowa

Full Name (Last, First, Middle Initial)

**A. Bankers Trust (VISA)**

Mailing Address PO Box 1991

City Des Moines      State IA      Zip Code 50305-

Purpose of Disbursement  
SEE BELOW: CREDIT CARD PAYMENT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05      24      2012

Transaction ID : 20919.E51495

Amount of Each Disbursement this Period

266.43

SEE BELOW: CREDIT CARD PAYMENT

Full Name (Last, First, Middle Initial)

**B. Stephen Scheffler**

Mailing Address 5112 Tamara Ln

City WEST DES MOINES      State IA      Zip Code 50265-

Purpose of Disbursement  
SEE BELOW: Reimbursed Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05      10      2012

Transaction ID : 20611.E50504

Amount of Each Disbursement this Period

596.86

SEE BELOW: REIMBURSED TRAVEL

Full Name (Last, First, Middle Initial)

**C. Fairmont Scottsdale Princess**

Mailing Address 7575 East Princess Drive

City Scottsdale      State AZ      Zip Code 85255-

Purpose of Disbursement  
Scheffler - Lodging

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05      10      2012

Transaction ID : 20611.E50505

Amount of Each Disbursement this Period

450.40

**[MEMO ITEM]**  
MEMO: SCHEFFLER - LODGING

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

863.29

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Iowa

Full Name (Last, First, Middle Initial)

**A. Fairmont Scottsdale Princess**

Mailing Address 7575 East Princess Drive

City	State	Zip Code
Scottsdale	AZ	85255-

Purpose of Disbursement  
Scheffler - Meals

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		10		2012

Transaction ID : 20611.E50506

Amount of Each Disbursement this Period

32.46
-------

[MEMO ITEM]

MEMO: SCHEFFLER - MEALS

Full Name (Last, First, Middle Initial)

**B. Delta Airlines**

Mailing Address PO Box 20706

City	State	Zip Code
ATLANTA	GA	30320-

Purpose of Disbursement  
Scheffler - Baggage/Cab Fare

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		10		2012

Transaction ID : 20611.E50507

Amount of Each Disbursement this Period

114.00
--------

[MEMO ITEM]

MEMO: SCHEFFLER - BAGGAGE/CAB FARE

Full Name (Last, First, Middle Initial)

**C. Oxford Communications, LLC**

Mailing Address PO Box 1214

City	State	Zip Code
Alexandria	VA	22313-

Purpose of Disbursement  
Party Fundraising Postage/Non-FEA

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		02		2012

Transaction ID : 20615.E50522

Amount of Each Disbursement this Period

2610.00
---------

PARTY FUNDRAISING POSTAGE/NON-FEA

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2610.00
---------

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Iowa

Full Name (Last, First, Middle Initial)

**A. Chad Olsen**

Mailing Address 300 S. 5th Street

City	State	Zip Code
Guthrie Center	IA	50115-1605

Purpose of Disbursement  
Reimbursed for Mileage

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		02		2012

Transaction ID : 20514.E50321

Amount of Each Disbursement this Period

304.65
--------

REIMBURSED FOR MILEAGE

Full Name (Last, First, Middle Initial)

**B. Vonna Hall**

Mailing Address 5190 Stone Creek Dr

City	State	Zip Code
Pleasant Hill	IA	50327-2304

Purpose of Disbursement  
SEE BELOW: Reimbursed Office Suppli

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2012

Transaction ID : 20611.E50489

Amount of Each Disbursement this Period

102.51
--------

SEE BELOW: REIMBURSED OFFICE SUPPLI

Full Name (Last, First, Middle Initial)

**C. Aristotle International, Inc.**

Mailing Address 205 Pennsylvania Ave., SE

City	State	Zip Code
Washington	DC	20003-

Purpose of Disbursement  
FEC Reporting Software

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		15		2012

Transaction ID : 20611.E50397

Amount of Each Disbursement this Period

2100.00
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FEC REPORTING SOFTWARE

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2507.16
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<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Republican Party of Iowa

### A. Kabel Business Services

Category/  
Type

60.00

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

## PAYROLL SERVICE FEES

### B. Bankers Trust (VISA)

Category/  
Type

4197.86

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

SEE BELOW: CREDIT CARD PAYMENT

### C. Image Transform, LTD.

Category/  
Type

238.50

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

PARTY LOGO SIGN

4496.36





**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 28 OF 63

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Iowa

Full Name (Last, First, Middle Initial)

**A. United States Postal Service**Mailing Address Main Post Office  
2nd & University

City Des Moines      State IA      Zip Code 50306-

Purpose of Disbursement  
Party Fundraising Postage/Non-FEA

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05      24      2012

Transaction ID : 20615.E50531

Amount of Each Disbursement this Period

500.00

PARTY FUNDRAISING POSTAGE/NON-FEA

Full Name (Last, First, Middle Initial)

**B. Timothy Moran**

Mailing Address 2415 McDonald St

City Sioux City      State IA      Zip Code 51104-3739

Purpose of Disbursement  
Reimbursed for Mileage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05      15      2012

Transaction ID : 20611.E50479

Amount of Each Disbursement this Period

278.10

REIMBURSED FOR MILEAGE

Full Name (Last, First, Middle Initial)

**C. Victory Enterprises**

Mailing Address 5200 SW 30th St

City      State      Zip Code  
52802-Purpose of Disbursement  
Generic Texting Service

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05      15      2012

Transaction ID : 20611.E50487

Amount of Each Disbursement this Period

32.09

GENERIC TEXTING SERVICE

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

810.19



<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Republican Party of Iowa

### A. Kabel Business Services

60.00

## PAYROLL SERVICE FEES

**B. Capitol City Graphics, Inc.**

MM / DD / YYYY

2242.96

## PARTY FUNDRAISING PRINTING

### C. Capital City Graphics

180.20

## PARTY FUNDRAISING TICKET PRINTING

2483.16

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 31 OF 63

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Iowa

Full Name (Last, First, Middle Initial)

**A. Alliance Technologies**

Mailing Address 400 Locust Street Suite 840

City Des Moines      State IA      Zip Code 50309-

Purpose of Disbursement  
Computer Repairs

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05      02      2012

Transaction ID : 20514.E50316

Amount of Each Disbursement this Period

302.50

COMPUTER REPAIRS

**B. Iowa Events Center**

Mailing Address 730 Third Street

City Des Moines      State IA      Zip Code 50309-

Purpose of Disbursement  
Fundraising Facility Rental/Caterin

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05      07      2012

Transaction ID : 20615.E50524

Amount of Each Disbursement this Period

17232.94

FUNDRAISING FACILITY RENTAL/CATERIN

**C. Paypal**

Mailing Address 2211 N First St

City San Jose      State CA      Zip Code 95131-

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05      31      2012

Transaction ID : 20611.E50470

Amount of Each Disbursement this Period

78.65

CREDIT CARD PROCESSING FEES

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

17614.09

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Republican Party of Iowa

### A. Kabel Business Services

Category/  
Type

19.50

## PAYROLL SERVICE FEES

Full Name (Last, First, Middle Initial)

### B. Bankers Trust Company

MM / DD / YYYY

Category/  
Type

367.58

BANK FEE

Full Name (Last, First, Middle Initial)

### C. Andrew Classen

Category/  
Type

400.00

PARTY FUNDRAISING ENTERTAINER

787.08

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Iowa

Full Name (Last, First, Middle Initial)

**A. Holiday Inn-Downtown**

Mailing Address 1050 6th Ave

City Des Moines      State IA      Zip Code 50314-2606

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 02 / 2012

Transaction ID : 20514.E50309

Amount of Each Disbursement this Period

246.40

LODGING

Full Name (Last, First, Middle Initial)

**B. Gopal Krishna**

Mailing Address 3901 Stonebridge Road

City West Des Moines      State IA      Zip Code 50265-

Purpose of Disbursement  
Reimbursed for Mileage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 01 / 2012

Transaction ID : 20615.E50510

Amount of Each Disbursement this Period

84.60

REIMBURSED FOR MILEAGE

Full Name (Last, First, Middle Initial)

**C. Ryan Gough**

Mailing Address 1331 University Avenue #210

City Waukee      State IA      Zip Code 50263-

Purpose of Disbursement  
SEE BELOW: Reimbursed Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 15 / 2012

Transaction ID : 20611.E50474

Amount of Each Disbursement this Period

47.92

SEE BELOW: REIMBURSED TRAVEL

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

378.92





	21b	<b>X</b>	22		23		24		25		26
	27		28a		28b		28c		29		30b

Republican Party of Iowa

Number of children	Frequency
0	100
1	400
2	1000
3	800
4	400
5	100
6	50
7	20
8	10
9	5
10	2

A diagram of a rectangular channel with a flat bottom and a flat water surface. The channel is represented by a rectangle with a solid bottom and a dashed line for the water surface. The water surface is at a constant height across the entire width of the channel.

2000.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Iowa

Full Name (Last, First, Middle Initial)

**A. David Chung**

Mailing Address 3725 2ND Ave. SE

City

Cedar Rapids

State

IA

Zip Code

52404-

Purpose of Disbursement

SEE BELOW: Reimbursed Travel

Candidate Name

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		04		2012

Transaction ID : 20611.E50412

Amount of Each Disbursement this Period

325.09
--------

SEE BELOW: REIMBURSED TRAVEL

Full Name (Last, First, Middle Initial)

**B. David Chung**

Mailing Address 3725 2ND Ave. SE

City

Cedar Rapids

State

IA

Zip Code

52404-

Purpose of Disbursement

Chung - Mileage Reimbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		04		2012

Transaction ID : 20611.E50413

Amount of Each Disbursement this Period

265.50
--------

**[MEMO ITEM]**

MEMO: CHUNG - MILEAGE REIMBURSEMENT

Full Name (Last, First, Middle Initial)

**C. Arena Communications**

Mailing Address 1780 W. Sequoia Vista Circle

City

Salt Lake City

State

UT

Zip Code

84104-

Purpose of Disbursement

Direct Mail

Candidate Name

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		17		2012

Transaction ID : 20615.E50528

Amount of Each Disbursement this Period

20121.00
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DIRECT MAIL

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

20446.09
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 38 OF 63

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Iowa

Full Name (Last, First, Middle Initial)

**A. Megan Stiles**

Mailing Address 615 Park Street #1607

City	State	Zip Code
Des Moines	IA	50309-

Purpose of Disbursement  
SEE BELOW: Reimbursed Travel

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2012

Transaction ID : 20611.E50463

Amount of Each Disbursement this Period

58.10
-------

SEE BELOW: REIMBURSED TRAVEL

Full Name (Last, First, Middle Initial)

**B. Megan Stiles**

Mailing Address 615 Park Street #1607

City	State	Zip Code
Des Moines	IA	50309-

Purpose of Disbursement  
Stiles - Mileage Reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2012

Transaction ID : 20611.E50466

Amount of Each Disbursement this Period

11.25
-------

[MEMO ITEM]

MEMO: STILES - MILEAGE REIMBURSEMENT

Full Name (Last, First, Middle Initial)

**C. Coventry Health Care of Iowa**

Mailing Address P. O. Box 8500-53388

City	State	Zip Code
Phildadelphia	PA	19178-3388

Purpose of Disbursement  
Party Health Coverage

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		02		2012

Transaction ID : 20615.E50517

Amount of Each Disbursement this Period

890.11
--------

PARTY HEALTH COVERAGE

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

948.21
--------

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 39 OF 63

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Iowa

Full Name (Last, First, Middle Initial)

**A. William Schickel**

Mailing Address 1443 E State St

City	State	Zip Code
Mason City	IA	50401-4433

Purpose of Disbursement  
SEE BELOW: Reimbursed Travel

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		10		2012

Transaction ID : 20611.E50399

Amount of Each Disbursement this Period

421.61
--------

SEE BELOW: REIMBURSED TRAVEL

Full Name (Last, First, Middle Initial)

**B. William Schickel**

Mailing Address 1443 E State St

City	State	Zip Code
Mason City	IA	50401-4433

Purpose of Disbursement  
Schickel - Mileage Reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		10		2012

Transaction ID : 20611.E50400

Amount of Each Disbursement this Period

410.40
--------

**[MEMO ITEM]**

MEMO: SCHICKEL - MILEAGE REIMBURSEMENT

Full Name (Last, First, Middle Initial)

**C. John Ortega**

Mailing Address 2360 West Dale Court

City	State	Zip Code
Bettendorf	IA	52722-

Purpose of Disbursement  
SEE BELOW: Reimbursed Travel

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		29		2012

Transaction ID : 20611.E50429

Amount of Each Disbursement this Period

409.86
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SEE BELOW: REIMBURSED TRAVEL

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

831.47
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 40 OF 63

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Iowa

Full Name (Last, First, Middle Initial)

**A. John Ortega**

Mailing Address 2360 West Dale Court

City  
BettendorfState  
IAZip Code  
52722-Purpose of Disbursement  
Ortega - Mileage Reimbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		29		2012

Transaction ID : 20611.E50430

Amount of Each Disbursement this Period

335.79
--------

**[MEMO ITEM]**

MEMO: ORTEGA - MILEAGE REIMBURSEMENT

Full Name (Last, First, Middle Initial)

**B. Megan Stiles**

Mailing Address 615 Park Street #1607

City  
Des MoinesState  
IAZip Code  
50309-Purpose of Disbursement  
SEE BELOW: Reimbursed Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		29		2012

Transaction ID : 20611.E50451

Amount of Each Disbursement this Period

423.16
--------

SEE BELOW: REIMBURSED TRAVEL

Full Name (Last, First, Middle Initial)

**C. Cab Plus**

Mailing Address 4810 N Hale Ave

City  
TampaState  
FLZip Code  
33614-Purpose of Disbursement  
Stiles - Cab Fare

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		29		2012

Transaction ID : 20611.E50452

Amount of Each Disbursement this Period

100.00
--------

**[MEMO ITEM]**

MEMO: STILES - CAB FARE

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

423.16
--------





**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 43 OF 63

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Iowa

Full Name (Last, First, Middle Initial)

**A. R. Friedrich & Sons, Inc.**

Mailing Address 619 E Lincoln Way

City	State	Zip Code
Castle Rock	MN	55010-

Purpose of Disbursement  
Office Rent

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2012

Transaction ID : 20615.E50535

Amount of Each Disbursement this Period

626.61
--------

OFFICE RENT

Full Name (Last, First, Middle Initial)

**B. Arena Communications**

Mailing Address 1780 W. Sequoia Vista Circle

City	State	Zip Code
Salt Lake City	UT	84104-

Purpose of Disbursement  
Direct Mail

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		17		2012

Transaction ID : 20615.E50529

Amount of Each Disbursement this Period

14879.00
----------

DIRECT MAIL

Full Name (Last, First, Middle Initial)

**C. Delta Dental Plan of Iowa**

Mailing Address PO Box 857

City	State	Zip Code
Ankeny	IA	50021-0857

Purpose of Disbursement  
Party Dental Insurance

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2012

Transaction ID : 20611.E50416

Amount of Each Disbursement this Period

318.91
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PARTY DENTAL INSURANCE

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

15824.52
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	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

Republican Party of Iowa

### A. Delta Dental Plan of Iowa

Date of Disbursement

Transaction ID : 20611.E50418

Amount of Each Disbursement this Period

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

136.63

PARTY DENTAL INSURANCE

### B. Coventry Health Care of Iowa

Date of Disbursement

MM / DD / YYYY

Transaction ID : 20611.E50406

Amount of Each Disbursement this Period

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

1112.49

## PARTY HEALTH COVERAGE

**C. R. Friedrich & Sons, Inc.**

Date of Disbursement

Transaction ID : 20615.E50536

Amount of Each Disbursement this Period

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

1387.50

OFFICE RENT

**SUBTOTAL** of Disbursements This Page (optional).....

2636.62

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Iowa

Full Name (Last, First, Middle Initial)

**A. Kabel Business Services**

Mailing Address 1454 30th Street Suite 202

City	State	Zip Code
West Des Moines	IA	50266-

Purpose of Disbursement  
SEE BELOW: PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		17		2012

Transaction ID : 20615.E50552

Amount of Each Disbursement this Period

23102.24
----------

SEE BELOW: PAYROLL

Full Name (Last, First, Middle Initial)

**B. Vonna Hall**

Mailing Address 5190 Stone Creek Dr

City	State	Zip Code
Pleasant Hill	IA	50327-2304

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		17		2012

Transaction ID : 20615.E50553

Amount of Each Disbursement this Period

1335.07
---------

[MEMO ITEM]  
MEMO: SALARY

Full Name (Last, First, Middle Initial)

**C. Chad Olsen**

Mailing Address 300 S. 5th Street

City	State	Zip Code
Guthrie Center	IA	50115-1605

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		17		2012

Transaction ID : 20615.E50554

Amount of Each Disbursement this Period

9084.65
---------

[MEMO ITEM]  
MEMO: SALARY

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

23102.24
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 46 OF 63

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Iowa

Full Name (Last, First, Middle Initial)

**A. Megan Stiles**

Mailing Address 615 Park Street #1607

City	State	Zip Code
Des Moines	IA	50309-

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		17		2012

Transaction ID : 20615.E50555

Amount of Each Disbursement this Period

1199.47
---------

[MEMO ITEM]

MEMO: SALARY

Full Name (Last, First, Middle Initial)

**B. Paige Thorson**

Mailing Address 523 Miller Ave

City	State	Zip Code
Des Moines	IA	50315-3158

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		17		2012

Transaction ID : 20615.E50556

Amount of Each Disbursement this Period

487.98
--------

[MEMO ITEM]

MEMO: SALARY

Full Name (Last, First, Middle Initial)

**C. Andrew Selden**

Mailing Address 686 63rd St

City	State	Zip Code
Des Moines	IA	50312-

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		17		2012

Transaction ID : 20615.E50557

Amount of Each Disbursement this Period

1366.00
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[MEMO ITEM]

MEMO: SALARY

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00
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	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

Republican Party of Iowa

### A. Kabel Business Services

Date of Disbursement

Category/  
Type

Amount of Each Disbursement this Period

85.28

MEMO: PAYROLL FEES

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

## B. United States Treasury

Date of Disbursement

MM / DD / YYYY

Category/  
Type

Transaction ID : 20615.E50559

Amount of Each Disbursement this Period

6335.30

**[MEMO ITEM]**

MEMO: TAXES

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. Treasurer, State Of Iowa**

Date of Disbursement

05 / 17 / 2012

Category/  
Type

Transaction ID : 20615.E50560

Amount of Each Disbursement this Period

1108.00

**[MEMO ITEM]**

## MEMO: TAXES

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

---

**SUBTOTAL** of Disbursements This Page (optional).....

0.00

**TOTAL** This Period (last page this line number only).....

\_\_\_\_\_



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 49 OF 63

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Iowa

Full Name (Last, First, Middle Initial)

**A. Kabel Business Services**

Mailing Address 1454 30th Street Suite 202

City	State	Zip Code
West Des Moines	IA	50266-

Purpose of Disbursement  
SEE BELOW: PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
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Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2012

Transaction ID : 20615.E50538

Amount of Each Disbursement this Period

16455.72
----------

SEE BELOW: PAYROLL

Full Name (Last, First, Middle Initial)

**B. Ryan Gough**

Mailing Address 1331 University Avenue #210

City	State	Zip Code
Waukee	IA	50263-

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
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Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2012

Transaction ID : 20615.E50539

Amount of Each Disbursement this Period

2088.70
---------

[MEMO ITEM]  
MEMO: SALARY

Full Name (Last, First, Middle Initial)

**C. Vonna Hall**

Mailing Address 5190 Stone Creek Dr

City	State	Zip Code
Pleasant Hill	IA	50327-2304

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
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Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2012

Transaction ID : 20615.E50540

Amount of Each Disbursement this Period

1278.38
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[MEMO ITEM]  
MEMO: SALARY

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

16455.72
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# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 50 OF 63

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

**Republican Party of Iowa**

Full Name (Last, First, Middle Initial)

**A. Chad Olsen**

Mailing Address 300 S. 5th Street

City State Zip Code  
 Guthrie Center IA 50115-1605

Purpose of Disbursement  
 SALARY

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
 05 03 2012

**Transaction ID : 20615.E50541**

Amount of Each Disbursement this Period

3130.96

**[MEMO ITEM]**

MEMO: SALARY

Full Name (Last, First, Middle Initial)

**B. Andrew Selden**

Mailing Address 686 63rd St

City State Zip Code  
 Des Moines IA 50312-

Purpose of Disbursement  
 SALARY

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
 05 03 2012

**Transaction ID : 20615.E50542**

Amount of Each Disbursement this Period

657.49

**[MEMO ITEM]**

MEMO: SALARY

Full Name (Last, First, Middle Initial)

**C. Ashley James Spiker**

Mailing Address 1019 Gaskill Drive

City State Zip Code  
 Ames IA 50010-

Purpose of Disbursement  
 SALARY

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
 05 03 2012

**Transaction ID : 20615.E50543**

Amount of Each Disbursement this Period

1458.33

**[MEMO ITEM]**

MEMO: SALARY

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 51 OF 63

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Iowa

Full Name (Last, First, Middle Initial)

**A. Patrick Stewart**

Mailing Address 615 Park St

City

Des Moines

State

IA

Zip Code

50302-

Purpose of Disbursement

SALARY

Candidate Name

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2012

Transaction ID : 20615.E50544

Amount of Each Disbursement this Period

1082.12
---------

[MEMO ITEM]

MEMO: SALARY

Full Name (Last, First, Middle Initial)

**B. Megan Stiles**

Mailing Address 615 Park Street #1607

City

Des Moines

State

IA

Zip Code

50309-

Purpose of Disbursement

SALARY

Candidate Name

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2012

Transaction ID : 20615.E50545

Amount of Each Disbursement this Period

1199.46
---------

[MEMO ITEM]

MEMO: SALARY

Full Name (Last, First, Middle Initial)

**C. Paige Thorson**

Mailing Address 523 Miller Ave

City

Des Moines

State

IA

Zip Code

50315-3158

Purpose of Disbursement

SALARY

Candidate Name

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2012

Transaction ID : 20615.E50546

Amount of Each Disbursement this Period

775.89
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[MEMO ITEM]

MEMO: SALARY

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 52 OF 63

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Iowa

Full Name (Last, First, Middle Initial)

**A. Kabel Business Services**

Mailing Address 1454 30th Street Suite 202

City	State	Zip Code
West Des Moines	IA	50266-

Purpose of Disbursement  
PAYROLL FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2012

Transaction ID : 20615.E50547

Amount of Each Disbursement this Period

50.76
-------

[MEMO ITEM]

MEMO: PAYROLL FEES

Full Name (Last, First, Middle Initial)

**B. United States Treasury**

Mailing Address Internal Revenue Service Center

City	State	Zip Code
Kansas City	MO	64999-

Purpose of Disbursement  
TAXES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2012

Transaction ID : 20615.E50548

Amount of Each Disbursement this Period

3111.12
---------

[MEMO ITEM]

MEMO: TAXES

Full Name (Last, First, Middle Initial)

**C. Treasurer, State Of Iowa**

Mailing Address Hoover Office Building

City	State	Zip Code
Des Moines	IA	50319-

Purpose of Disbursement  
TAXES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2012

Transaction ID : 20615.E50549

Amount of Each Disbursement this Period

628.00
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[MEMO ITEM]

MEMO: TAXES

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 53 OF 63

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Iowa

Full Name (Last, First, Middle Initial)

**A. State of Iowa - Workforce Development**

Mailing Address PO Box 9231

City	State	Zip Code
Des Moines	IA	50306-9231

Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2012

Transaction ID : 20615.E50550

Amount of Each Disbursement this Period

370.01
--------

[MEMO ITEM]

MEMO: PAYROLL TAXES

Full Name (Last, First, Middle Initial)

**B. Kabel Business Services**

Mailing Address 1454 30th Street Suite 202

City	State	Zip Code
West Des Moines	IA	50266-

Purpose of Disbursement  
EMPLOYEE HSA CONTRIBUTION

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2012

Transaction ID : 20615.E50551

Amount of Each Disbursement this Period

624.50
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[MEMO ITEM]

MEMO: EMPLOYEE HSA CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. Gopal Krishna**

Mailing Address 3901 Stonebridge Road

City	State	Zip Code
West Des Moines	IA	50265-

Purpose of Disbursement  
SEE BELOW: Reimbursed Travel

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		10		2012

Transaction ID : 20611.E50422

Amount of Each Disbursement this Period

117.09
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SEE BELOW: REIMBURSED TRAVEL

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

117.09
--------

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 54 OF 63

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Republican Party of Iowa

Full Name (Last, First, Middle Initial)

**A. Gopal Krishna**

Mailing Address 3901 Stonebridge Road

City	State	Zip Code
West Des Moines	IA	50265-

Purpose of Disbursement  
Krishna - Mileage Reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	10	/	2012

Transaction ID : 20611.E50423

Amount of Each Disbursement this Period

108.00
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**[MEMO ITEM]**

MEMO: KRISHNA - MILEAGE REIMBURSEMENT

Full Name (Last, First, Middle Initial)

**B. Latham for Congress**

Mailing Address PO Box 71

City	State	Zip Code
Clarion	IA	50525-

Purpose of Disbursement  
Office Rent

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2012

Transaction ID : 20615.E50534

Amount of Each Disbursement this Period

1333.33
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OFFICE RENT

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1333.33
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82118.45
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**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Republican Party of Iowa

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

FLS Connect, LLC

Nature of Debt (Purpose):

Telemarketing

Mailing Address 7300 Hudson Blvd., Suite 270

City State

Zip Code

St. Paul

MN

55128-

Outstanding Balance Beginning This Period

27657.15

Transaction ID : LS30829.E54258

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

27657.15

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

FLS Connect, LLC

Nature of Debt (Purpose):

Telemarketing

Mailing Address 7300 Hudson Blvd., Suite 270

City State

Zip Code

St. Paul

MN

55128-

Outstanding Balance Beginning This Period

17004.44

Transaction ID : LS30829.E54260

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

17004.44

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ►

44661.59

2) TOTALS This Period (last page this line number only)..... ►

44661.59

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ..... ►

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

44661.59

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 56 OF 63

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Iowa

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Benefit Source, Inc</b>		<b>Transaction ID : H420611.E50398</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 4000 Westown Pkwy					
City West Des Moines	State IA	Zip Code 50266-6705			
Purpose of Disbursement: Healthcare Admin Fee				Allocated Activity or Event Year-To-Date 182248.30	
Activity or Event Identifier: <b>ADMINISTRATION B 1</b>		Category/ Type		Date <input type="text" value="05"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
58.80			151.20		210.00

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Diamond Cleaning Service</b>		<b>Transaction ID : H420611.E50420</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 185 NW 66th Ave					
City Des Moines	State IA	Zip Code 50313-1152			
Purpose of Disbursement: Office Cleaning Service				Allocated Activity or Event Year-To-Date 182038.30	
Activity or Event Identifier: ADMINISTRATION B 1		Category/ Type		Date <input type="text" value="05"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
74.20			190.80		265.00

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Grinnell Middle School</b>		<b>Transaction ID : H420611.E50425</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 132 East Street South					
City	State	Zip Code 50112-			
Purpose of Disbursement: Facility Rental				Allocated Activity or Event Year-To-Date 183162.18	
Activity or Event Identifier: ADMINISTRATION B 1		Category/ Type		Date <input type="text" value="05"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
145.60			374.40		520.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
278.60		716.40		995.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 57 OF 63

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Iowa

<b>A. Full Name (Last, First, Middle Initial)</b> <b>I-wire electric</b>		<b>Transaction ID : H420611.E50427</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1824 79th St					
City Windsor Heights	State IA	Zip Code 50324-5729			
Purpose of Disbursement: Building Maintenance				Allocated Activity or Event Year-To-Date 181773.30	
Activity or Event Identifier: <b>ADMINISTRATION B 1</b>		Category/ Type		Date <input type="text" value="05"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
70.16			180.42		250.58

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Mediacom</b>		<b>Transaction ID : H420611.E50450</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 5744					
City Carol Stream	State IL	Zip Code 60197-5744			
Purpose of Disbursement: Internet Service				Allocated Activity or Event Year-To-Date 188411.87	
Activity or Event Identifier: ADMINISTRATION B 1		Category/ Type		Date <input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2012"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
52.04			133.82		185.86

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Mid American Energy</b>		<b>Transaction ID : H420611.E50468</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 8020					
City Davenport	State IA	Zip Code 52808-8020			
Purpose of Disbursement: Utilities				Allocated Activity or Event Year-To-Date 181114.00	
Activity or Event Identifier: ADMINISTRATION B 1		Category/ Type		Date <input type="text" value="05"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
118.89			305.71		424.60

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
241.09		619.95		861.04

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 58 OF 63

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Iowa

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Office Depot</b>		<b>Transaction ID : H420611.E50469</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 9020					
City Des Moines	State IA	Zip Code 50368-9020			
Purpose of Disbursement: Generic Office Supplies				Allocated Activity or Event Year-To-Date 185796.37	
Activity or Event Identifier: <b>ADMINISTRATION B 1</b>		Category/ Type		Date 05 / 29 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
146.91			377.78		524.69

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Per Mar Security Services</b>		<b>Transaction ID : H420611.E50471</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 1101					
City Davenport	State IA	Zip Code 52805-1101			
Purpose of Disbursement: Building Security				Allocated Activity or Event Year-To-Date 181159.87	
Activity or Event Identifier: ADMINISTRATION B 1		Category/ Type		Date 05 / 15 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
12.84			33.03		45.87

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Per Mar Security Services</b>		<b>Transaction ID : H420611.E50472</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 1101					
City Davenport	State IA	Zip Code 52805-1101			
Purpose of Disbursement: Building Security				Allocated Activity or Event Year-To-Date 181204.64	
Activity or Event Identifier: ADMINISTRATION B 1		Category/ Type		Date 05 / 15 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
12.54			32.23		44.77

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
172.29		443.04		615.33

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 59 OF 63

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Iowa

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Pitney Bowes Global Fin. Services, LLC</b>		<b>Transaction ID : H420611.E50473</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 856460					
City Louisville	State KY	Zip Code 40285-6460			
Purpose of Disbursement: Equipment Lease Expenses				Allocated Activity or Event Year-To-Date 188226.01	
Activity or Event Identifier: <b>ADMINISTRATION B 1</b>		Category/ Type		Date MM / DD / YYYY 05 / 29 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
322.86			830.21		1153.07

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Shades Of Green Landscaping</b>		<b>Transaction ID : H420611.E50477</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 71184					
City Clive	State IA	Zip Code 50325-			
Purpose of Disbursement: Lawn Maintenance				Allocated Activity or Event Year-To-Date 185271.68	
Activity or Event Identifier: ADMINISTRATION B 1		Category/ Type		Date MM / DD / YYYY 05 / 17 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
233.58			600.64		834.22

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Sprint</b>		<b>Transaction ID : H420611.E50478</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P O Box 4181					
City Carol Stream	State IL	Zip Code 60197-			
Purpose of Disbursement: Party Cell Service				Allocated Activity or Event Year-To-Date 181522.72	
Activity or Event Identifier: ADMINISTRATION B 1		Category/ Type		Date MM / DD / YYYY 05 / 15 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
89.06			229.02		318.08

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
645.50		1659.87		2305.37

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Iowa

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Verizon Wireless</b>		<b>Transaction ID : H420611.E50485</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 2167					
City FOLSOM	State CA	Zip Code 95763-			
Purpose of Disbursement: Party Cell Phone Service				Allocated Activity or Event Year-To-Date 182642.18	
Activity or Event Identifier: <b>ADMINISTRATION B 1</b>		Category/ Type		Date <input type="text" value="05"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
110.29			283.59		393.88

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Windstream /PAETEC</b>		<b>Transaction ID : H420611.E50490</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 1283					
City Buffalo	State NY	Zip Code 14240-1283			
Purpose of Disbursement: Phone Service				Allocated Activity or Event Year-To-Date 184437.46	
Activity or Event Identifier: ADMINISTRATION B 1		Category/ Type		Date <input type="text" value="05"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
357.08			918.20		1275.28

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Xerox Corporation</b>		<b>Transaction ID : H420611.E50492</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 802567					
City Chicago	State IL	Zip Code 60680-2567			
Purpose of Disbursement: Copier Lease				Allocated Activity or Event Year-To-Date 187072.94	
Activity or Event Identifier: ADMINISTRATION B 1		Category/ Type		Date <input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2012"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
256.12			658.59		914.71

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
723.49		1860.38		2583.87

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 61 OF 63

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Iowa

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Culligan Water Conditioning</b>		<b>Transaction ID : H420615.E50511</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 65065					
City West Des Moines	State IA	Zip Code 50265-0065			
Purpose of Disbursement: Water Dispenser				Allocated Activity or Event Year-To-Date 165097.28	
Activity or Event Identifier: <b>ADMINISTRATION B 1</b>		Category/ Type		Date 05 / 02 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
12.93			33.24		46.17

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Waste Connections Inc.</b>		<b>Transaction ID : H420615.E50512</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 3071 Dept. 1433					
City Los Angeles	State CA	Zip Code 90084-1433			
Purpose of Disbursement: Waste Removal				Allocated Activity or Event Year-To-Date 165241.45	
Activity or Event Identifier: ADMINISTRATION B 1		Category/ Type		Date 05 / 02 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
40.37			103.80		144.17

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Des Moines Water Works</b>		<b>Transaction ID : H420615.E50513</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 9227					
City Des Moines	State IA	Zip Code 50306-9227			
Purpose of Disbursement: Water & Sewer Service				Allocated Activity or Event Year-To-Date 166503.54	
Activity or Event Identifier: ADMINISTRATION B 1		Category/ Type		Date 05 / 02 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
9.03			23.22		32.25

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
62.33		160.26		222.59

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 62 OF 63

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Iowa

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Pitney Bowes Purchase Power</b>		<b>Transaction ID : H420615.E50515</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 856042					
City Louisville	State KY	Zip Code 40285-6042			
Purpose of Disbursement: Generic Party Postage				Allocated Activity or Event Year-To-Date 166471.29	
Activity or Event Identifier: <b>ADMINISTRATION B 1</b>		Category/ Type		Date 05 / 02 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
344.36			885.48		1229.84

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Mediacom</b>		<b>Transaction ID : H420615.E50516</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 5744					
City Carol Stream	State IL	Zip Code 60197-5744			
Purpose of Disbursement: Internet Service				Allocated Activity or Event Year-To-Date 166689.40	
Activity or Event Identifier: ADMINISTRATION B 1		Category/ Type		Date 05 / 02 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
52.04			133.82		185.86

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Cardinals FEC Compliance Services, PLC</b>		<b>Transaction ID : H420615.E50519</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 4182					
City St. Paul	State MN	Zip Code 55104-0182			
Purpose of Disbursement: Accounting & Compliance Consult				Allocated Activity or Event Year-To-Date 180689.40	
Activity or Event Identifier: ADMINISTRATION B 1		Category/ Type		Date 05 / 10 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
3920.00			10080.00		14000.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4316.40		11099.30		15415.70

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 63 OF 63

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Iowa

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Qwest</b>		<b>Transaction ID : H420615.E50532</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address   P. O. Box 91104					
City Seattle	State WA	Zip Code 98111-9204			
Purpose of Disbursement: Generic Party Phone Service				Allocated Activity or Event Year-To-Date 186158.23	
Activity or Event Identifier: <b>ADMINISTRATION B 1</b>		Category/ Type		Date <input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2012"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
<input type="text" value="101.32"/>			<input type="text" value="260.54"/>		<input type="text" value="361.86"/>

<b>B. Full Name (Last, First, Middle Initial)</b>		<b>Allocated Activity or Event:</b> <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
Mailing Address					
City	State	Zip Code			
Purpose of Disbursement:		Allocated Activity or Event Year-To-Date			
Activity or Event Identifier:		Date <input type="text"/> / <input type="text"/> / <input type="text"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
<input type="text"/>			<input type="text"/>		<input type="text"/>

<b>C. Full Name (Last, First, Middle Initial)</b>		<b>Allocated Activity or Event:</b> <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
Mailing Address					
City	State	Zip Code			
Purpose of Disbursement:		Allocated Activity or Event Year-To-Date			
Activity or Event Identifier:		Date <input type="text"/> / <input type="text"/> / <input type="text"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
<input type="text"/>			<input type="text"/>		<input type="text"/>

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="101.32"/>		<input type="text" value="260.54"/>		<input type="text" value="361.86"/>

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<input type="text" value="6541.02"/>		<input type="text" value="16819.74"/>		<input type="text" value="23360.76"/>